LLS TAP

# THERAPY ACCELERATION PROGRAM

LORE GRUENBAUM, VP, TAP JAVEED FROOZAN, VP, BD & SA

February 2023

LEUKEMIA & LYMPHOMA SOCIETY

### LLS MISSION AND PURPOSE

The mission of The Leukemia & Lymphoma Society (LLS) is to cure leukemia, lymphoma, Hodgkin's disease and myeloma, and improve the quality of life of patients and their families. We fund **RESEARCH** to advance lifesaving treatments.

We provide patients, survivors, caregivers, families and healthcare professionals with hope, guidance, **EDUCATION** and **SUPPORT**.

We drive **ADVOCACY** for policies that protect patient access to lifesaving treatment.



Approximately every **3 minutes** someone in the U.S. is diagnosed with blood cancer



Nearly **1.4 million** people in the U.S. are living with or in remission from leukemia, lymphoma or myeloma

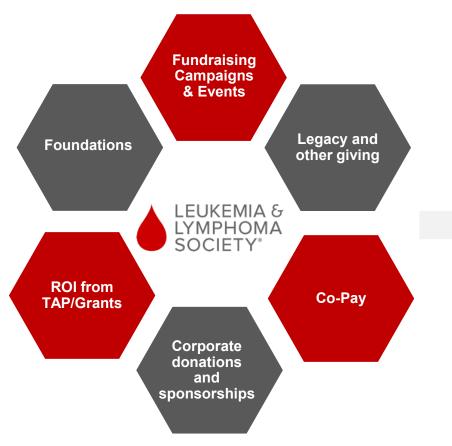
About **30 percent** of blood cancer patients still do not survive five years after diagnosis



About **40 percent** of all pediatric cancers are blood cancers



# LLS MISSION INVESTMENT IS SUPPORTED BY MULTIPLE REVENUE SOURCES



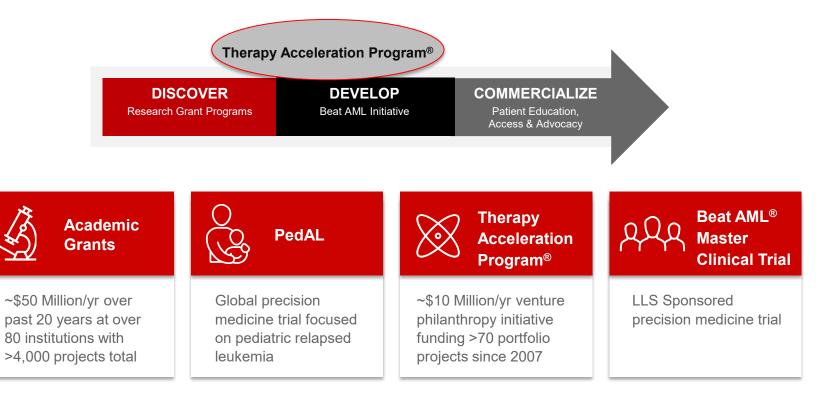
# **OUR IMPACT**

- Invested nearly \$1.6 billion in research and development worldwide since founded in 1949
- Helped advance more than 70% of FDA approved blood cancer treatments since 2017
- Supported >93,000 patients since inception
- Responded to 20,000 inquiries in 2019



# LLS GLOBAL RESEARCH AND DEVELOPMENT FOCUS

Research and development programs and clinical trials using LLS resources





# LLS THERAPY ACCELERATION PROGRAM (TAP)

#### Venture philanthropy funding to support novel therapies Established in 2007

#### Goals:

- Support LLS Mission to cure blood cancers
- FDA Approvals
- Assets in clinical development
- Strategic transactions & financing for portfolio companies
- Financial ROI to LLS

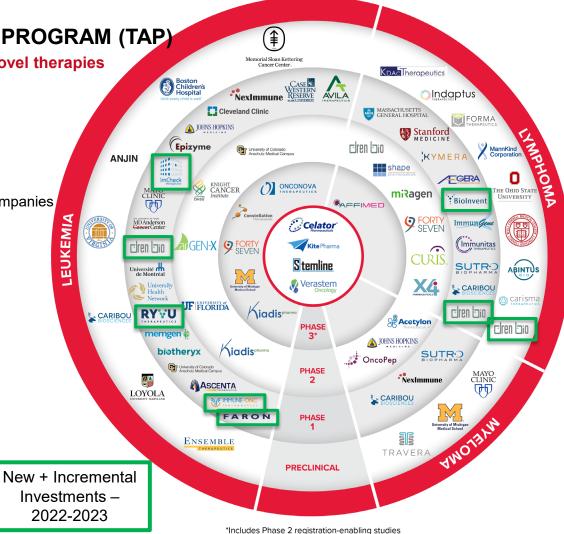
#### >\$140 Million invested to date

- Biotech: >\$105 Million
- Institutions: ~\$35 Million
- >70 financings of companies and assets
- >20 assets currently in active development

#### **4** Approved Therapies to Benefit Patients

- Vyxeos (AML) FDA
- Yescarta (DLBCL, tFL, PMBCL) FDA
- Elzonris (BPDCN) FDA
- Copiktra (PTCL) NCCN





### LLS TAP SCIENTIFIC & BUSINESS LEADERSHIP



#### Lore Gruenbaum, PhD VP, TAP

- 20 years drug discovery & clinical development
- VP, Gotham Therapeutics; Exec Dir, Applied Biomath
- Biomarker Head, Virology, Roche; Group Leader, BI
- Yale postdoctoral work, principal investigator and collaborator on several SBIR grants



#### Lee Greenberger, PhD SVP, Chief Scientific Officer

- 20 years big pharma and biotech
- Overight responsibility for >\$50 M annual research budget
- Advanced > 10 oncology therapeutics into the clinic
- Search & due diligence experience with big pharma



#### Javeed Froozan, MBA, BS VP, Business Development

- 25 years biopharma and health technology value creation
- Sr. Dir, Emergent BioSolutions, Multiple start-ups/exits, 2 IPOs
- Business lead on EBS-Trubion M&A transaction. Alliance Manager for Pfizer relationship
- Strategic Investments, M&A, Business Development, Asset Management, and Economic Development



#### Blaine Robinson, PhD Executive Director, TAP

- 15 years research & clinical development in blood cancer
- Search & Diligence on 100+ projects
- Scientific lead for over 20 TAP projects including Constellation, Kymera, Ryvu & most recently Caribou, Immune-Onc, Immunitas, Dren & BioInvent
- Pediatric leukemia researcher, Children's Hospital of Philadelphia



#### **Jun Xu, PhD** Executive Director – TAP Lead

- 20 years oncology/ immunology drug discovery/development
- Search & Diligence on 100+ projects
- Scientific lead for over 20 TAP projects including multiple high impact ones, such as Stemline, Kite, argenX, Forty Seven & most recently Carisma, Faron & ImCheck



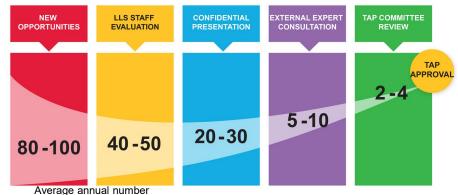
Therapy Acceleration Program Committee and Advisors: <u>https://www.lls.org/therapy-acceleration-program/oversight</u>

### **TAP GOALS & INVESTMENT STRATEGY**

Accelerate innovative blood cancer therapies and generate ROI for LLS mission

Focus on high-value assets:

- Existing and emerging populations with high unmet needs
- Gaps in current and emerging treatment landscape
- Innovative science, first-in-class assets
- First-in-heme/onc and registration trials
- Strong intellectual property, management, and finances





# TAP BIOTECH ACCELERATION MODEL

# 2 PATHS TO CO-INVEST WITH INVESTORS AND VENTURE PHILANTHROPIES



#### Strategic

- Range of Investment:
   \$2 Million to \$10 Million
- Presentation to TAP Committee
- Typically, 3-6 months to reach TAP Committee



#### **Opportunistic**

- Target Investment: \$500,000
- LLS TAP team briefs TAP Committee Chair
- Transaction completion in 1-3 months



# TAP ACTIVELY COLLABORATES WITH PARTNER COMPANIES

Investment Side Letter & Research Advisory Committee

#### Key features of LLS TAP Investment Side Letter

- Cites LLS Mission focus and company's focus and assets in blood cancer
- Investment amount on same terms and conditions as other investors, and use of proceeds (less detail for public companies)
- Exclusion of fees on LLS proceeds to investment banks and other intermediaries (via waiver, decreased total load, or refund to company)
- Information & observer rights (private firms)
- Research Advisory Committee (RAC) structure for recurring meetings between TAP team and company to discuss corporate and program progress – Company retains control of program
- Company participation in LLS events, publication review, and evaluate providing research materials to PI's.

Side letter captures the mission-driven collaborative nature of the relationship between LLS TAP and the partner companies





# TAP VALUE ADD TO BIOTECH COMPANIES

TAP-funded companies benefit from LLS blood cancer insight

- Deep knowledge of indications and rapidly changing SoC
- Unique scientific, clinical, and drug development expertise
- Patient access services to enable understanding of patient needs
- Immediate access to extensive KOL network
- Pharmaceutical, biotech, and research institution partner connections
- Regulatory insight through LLS initiatives (Beat AML Master Clinical Trial<sup>®</sup>)

TAP record of success provides scientific & investment credibility, and visibility enabling companies to raise additional funds.



### TAP PORTFOLIO ASSETS IN DEVELOPMENT

Therapy	Target/Modality	Indications	Preclinical	Phase 1	Phase 1 Expand/ Phase 2	Phase 2 Reg/ Phase 3	Regulatory Designations
Magrolimab + Azacitidine	CD47 antibody	MDS	1	1		<b>Orty</b> Seven <sup>1</sup>	
Pelabresib + Ruxolitinib	BET small molecule	MPN	I I	I	   		
Ziftomenib	Menin small molecule	NPM1 mutant AML	1				
AFM13 + NK-cells	CD30/CD16A bispecific engager	CD30+ lymphoma	1 1	1		1 0.001001	
IO-202 + Azacitidine	LILRB4 antibody	AML/CMML	1				
STRO-001	CD74 antibody drug conjugate	NHL/MM	1 1	BIOPHARMA	   	1	
ICT01	BTN3A antibody	heme malignancies	1	ImCheck			
RVU120	CDK8/19 small molecule	AML/MDS	1	RY∀U	1		
BI-1206 + Rituximab	FcγRIIB antibody	NHL	1	Biolnvent		1	
BI-1808 +/- Pembrolizumab	TNFR2 antibody	CTCL	1	Biolnvent			
PVX-410 + ACY-241 +/- Len	XBP1/CD138/CS1 vaccine	Smoldering myeloma	1 1	OncoPep	 	i I	
BTX-1188	GSPT1 + IKZF1/3 degrader	AML/NHL	1	biotheryx			
KT-333	STAT3 degrader	PTCL/CTCL/LGLL	l I	KYMERA	I	1	
KT-413	IRAKIMiD degrader	MYD88 mutant DLBCL	1	KYMERA		1	
Bexmarilimab + Azacitidine	Clever-1 antibody	AML/MDS	i I	FARON	 	i i	
DR-01	CD94 antibody	LGLL & cytotoxic lymphomas	1	dren bio			
IMT-009	CD161 antibody	NHL		Immunitas			
CB-010	CD19/PD1 KO allogeneic CAR	NHL	1				
CB-011	BCMA armored allogeneic CAR	ММ	1				
CB-012	CLL-1 armored allogeneic CAR	AML					
TBD	in vivo CAR-X	TBD	ABINTUS	I I			
TBD	CAR macrophage	TBD		1	   	1	

1: Acquired by Gilead 🔹 2: Acquired by Morphosys 🔹 3: Licensed from University of Michigan

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Orphan Drug 🔹 📕 Fast Track 🔹 📕 Breakthrough Therapy or Regenerative Medicine Advanced Therapy (RMAT)



### TAP FUNDED ASSETS CREATE VALUE

TAP portfolio partners have had successful M&A, collaboration and licensing transactions



# Transactions >\$20 Billion



# TAP PORTFOLIO COMPANY WITH ASSETS IN ACTIVE BLOOD CANCER DEVELOPMENT

# SIGNIFICANT EQUITY FINANCING RAISED CONCURRENT WITH OR POST- LLS TAP FUNDING

Equity since TAP Funding*	TAP Portfolio Company
>\$500 Million	Constellation/Morphosys¹ Kura Kymera
\$250-\$500 Million	Affimed <sup>2</sup> Caribou Carisma Forty Seven/Gilead <sup>3</sup> Sutro <sup>2</sup>
\$100-\$250 Million	BioTheryx ImCheck Immune-Onc Ryvu⁴
\$50-\$100 Million	Dren Immunitas
<\$50 Million	Abintus BioInvent Faron OncoPep

Table incudes assets without a regulatory approval. \*Updated as of February 1, 2023

1: LLS asset funding (07/2021 M&A by MorphoSys)

2: LLS asset funding

3: LLS equity participation plus asset funding (05/2020 M&A by Gilead)

4: LLS equity participation plus asset funding





# **KEY POINTS**

#### LLS TAP has established record of success

- Targeting unmet medical needs
- Leading to FDA approvals of life changing therapeutics
- Creating value for patients, companies and ROI for the LLS mission

#### LLS would like to expand the reach & impact of the TAP program

- Leverage its unique expertise in novel collaborations
- Attract more companies and investors to blood cancer indications
- Expand TAP capacity to support the most promising assets

#### For more information, contact:

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# TAP SUCCESS STORIES



### TAP SUCCESS: NOVEL LIPOSOMAL CYTOTOXIC THERAPY

Vyxeos® is the first FDA-approved treatment for two types of poor-prognosis AML (2017)

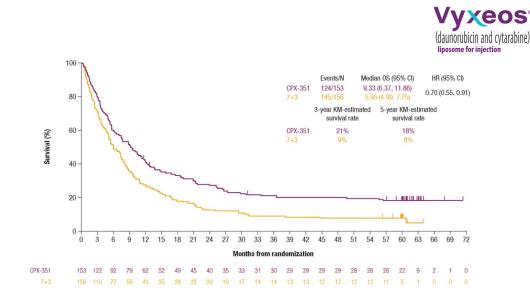


#### ACQUIRED BY JAZZ PHARMA FOR \$1.5 BILLION IN 2016

LLS TAP PROVIDED:

**\$9.15 MILLION ASSET FUNDING** 

ROI: \$25.3 MILLION



Five-year final results of a phase 3 study of CPX-351 versus 7+3 in older adults with newly diagnosed high-risk/secondary AML

J. Lancet et al., ASCO 2020



# TAP SUCCESS: CD19 CHIMERIC ANTIGEN RECEPTOR (CAR) T-CELL THERAPY

*Yescarta*<sup>®</sup> is the first FDA-approved CAR-T Therapy in NHL (2017) LLS has invested > \$100 M in Cellular Immunotherapy since 1998

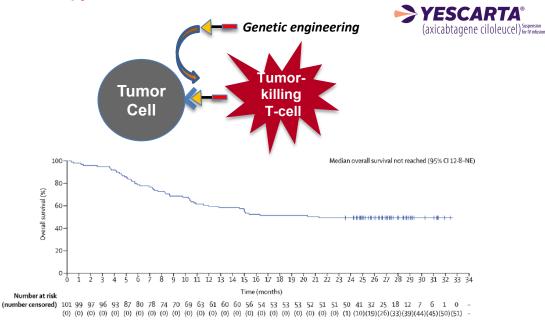


#### ACQUIRED BY GILEAD FOR \$11.9 BILLION IN 2017

LLS TAP PROVIDED:

**\$2.5 MILLION ASSET FUNDING** 

**ROI: \$6.25 MILLION** 



Long-term safety and activity of axicabtagene ciloleucel in refractory large B-cell lymphoma (ZUMA-1): a single-arm, multicenter, Ph 1-2 trial Locke et al. 2019. Lancet Oncology



# TAP SUCCESS: NOVEL TARGETED CD123 FUSION PROTEIN

**Elzonris®** is the first approved therapy for rare blood cancer indication BPDCN (2018)

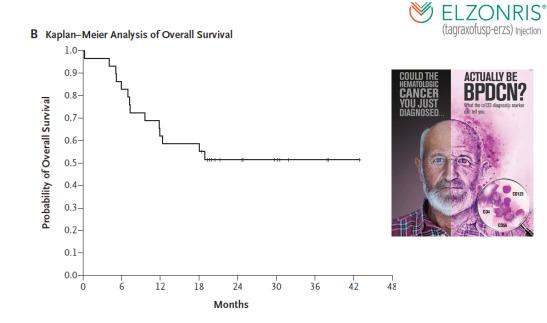


#### ACQUIRED BY MENARINI GROUP FOR \$677 MILLION IN 2020

LLS TAP PROVIDED:

**\$2.9 MILLION NET ASSET FUNDING** 

#### **ROI: \$7.25 MILLION TO DATE**



Treatment outcomes of 29 patients with blastic plasmacytoid dendritic cell neoplasm (BPDCN) who received first-line treatment with tagraxofusp: Probability of overall survival



### TAP SUCCESS: DUVELISIB (DUAL PI3K INHIBITOR)

Copiktra® is the first dual PI3K inhibitor included in NCCN Guidelines for all subtypes of PTCL (2021)



duvelisib acquired by

#### LICENSED TO SECURA BIO FOR UP TO \$311 MILLION IN 2020

LLS TAP PROVIDED:

\$1.485 MILLION ASSET FUNDING

**ROI: TBD** 

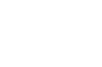
Table 1. Preliminary Outcomes by Prior Regimens and Prior Anticancer Therapy

OUTCOME	PRIMO-EP (N=101)
ORR by IRC, n (%) [95% CI]	49 (48.5) [38.8–58.3]
CR by IRC, n (%) [95% CI]	34 (33.7) [24.4–42.9]
Response (CR + PR) by number of prior regimens, %	
1 prior regimen (n=26)	34.6
2 prior regimens (n=22)	63.6
3+ prior regimens (n=53)	49.1
BOR by prior therapy, (% of subgroup): CR / PR / SD	
Prior CHOP/R-CHOP	37.8 / 5.4 / 2.7
Prior CHOEP/EPOCH	27.0 / 27.0 / 0
Prior Salvage Chemotherapy CHOP/R-CHOP or CHOEP/EPOCH	44.7 / 7.9 / 0
Prior BV or BV-chemo	32.4 / 10.8 / 0
Prior SCT	22.7 / 27.3 / 0

BV-chemo, brentuximab vedotin + cyclophosphamide + doxorubicin + prednisone; CHOEP, cyclophosphamide + doxorubicin + vincristine + etoposide + prednisone; CHOP, cyclophosphamide + doxorubicin + vincristine + prednisone; EPOCH, etoposide + prednisone + vincristine + cyclophosphamide + doxorubicin; R-CHOP, rituximab + CHOP.

Jacobsen et al., ASH 2022

 "Patients with r/r PTCL usually relapse quickly and have limited treatment options, and the data from the PRIMO trial show very promising activity and even a remarkable number of complete responses. Importantly, these responses are better than current standard of care options" said Dr. Brammer.



# TAP SUCCESS: MAGROLIMAB (ANTI-CD47 ANTIBODY)

Magrolimab + Azacitidine induces high response rates in MDS and AML Initiation of registration-enabling study in 2020

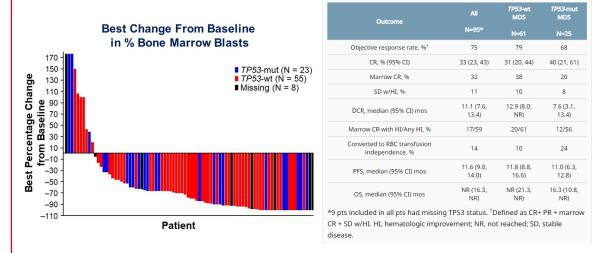
**Forty Seven** 

#### ACQUIRED BY GILEAD FOR \$4.9 BILLION IN 2020

LLS TAP PROVIDED:

#### \$4.175 MILLION ASSET FUNDING \$3 MILLION EQUITY INVESTMENT

ROI: >\$40 MILLION



Sallman et al., ASCO 2022

- Magrolimab + Azacitidine was well tolerated with promising efficacy in patients with untreated HR-MDS including those with TP53-mut and TP53-wt disease.
- Phase 3 trial of magrolimab/placebo+azacitidine (ENHANCE: NCT04313881) has competed enrollment. Next update is expected in 2H 2023.



# TAP SUCCESS: PELABRESIB (BET INHIBITOR)

Pelabrelib + Ruxolitinib induces high spleen volume response rates in JAK-naive myelofibrosis Initiation of registration-enabling study in 2020



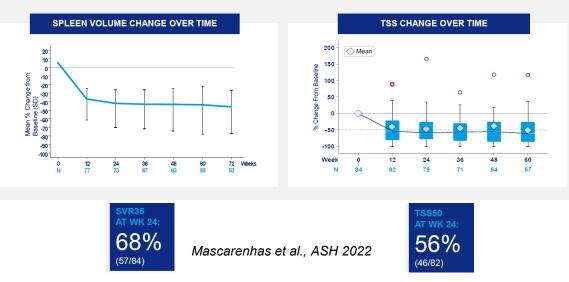
ACQUIRED BY MORPHOSYS FOR \$1.7 BILLION IN 2021

LLS TAP PROVIDED:

**\$7.35 MILLION ASSET FUNDING** 

**ROI: \$7.35 MILLION TO DATE** 

Results show deep and durable improvements in both spleen volume and symptom score beyond 24 weeks



- Spleen response is also associated with improvements in bone marrow morphology and reduction in *JAK2 V617F* allele frequency.
- Phase 3 trial of pelabresib/placebo+ruxolitinib (MANIFEST-2: NCT04603495) has competed enrollment. Topline data expected in early 2024.

# TAP SUCCESS: ZIFTOMENIB (MENIN INHIBITOR)

Ziftomenib induces complete response rates in NPM1-mutant AML at optimal 600 mg daily dose Initiation of registration-enabling study in 2023



#### PRECLINICAL COMPOUNDS RELATED TO KO-539 LICENSED TO KURA ONCOLOGY IN 2015

LLS TAP PROVIDED:

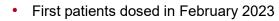
#### \$6.31 MILLION ASSET FUNDING TO UNIV OF MICHIGAN

ROI: EQUITY: 26,000+ SHARES + \$26,000+ CASH TO DATE

Best Overall Response	200 mg	600 mg	• 2 pts had
NPM1-m Phase 1a + 1b	(n=6)	(n=20)	<ul> <li>concurrent IDH1/2</li> <li>2 pts had both</li> </ul>
CR	1 (16.7)	6 (30.0)	IDH1/2 and FLT3- ITD/TKD
CR/CRh	1 (16.7)	6 (30.0)	
CRc	1 (16.7)	7 (35.0)	Of IDH1/2 co-mutan
MRD negativity	1 (100.0)	3 (42.9) <sup>1</sup>	(7), 57% experience a CR
ORR	2 (33.3)	8 (40.0)	
KMT2A-r Phase 1a + 1b	(n=14)	(n=18)	
CR/CRh	0	1 (5.6)	
CRc	0	2 (11.1)	
MRD negativity	0	2 (100.0)	
ORR	0	3 (16.7)	

Erba et al. ASH 2022

- Grants initially and then TAP supported preclinical development (including chemistry) of menin-MLL interaction inhibitors by Jolanta Grembecka at University of Michigan and licensing of assets to Kura Oncology in Dec 2014
- Phase 2 registration-directed trial for R/R AML with NPM1 mutations LEUI





# THERAPY ACCELERATION PROGRAM (TAP) ADVISORS

#### **Committee**

Casey Cunningham, MD (Chair) + Santé Ventures

Francie Heller + Arabesque Asset Management

Jim Reddoch, PhD + Royalty Pharma

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Sarah Tasian, MD Children's Hospital of Philadelphia

Amit Verma, MD Albert Einstein College of Medicine



+ National Board Member

# **THANK YOU!**

#### LLS Research **Grants and TAP**

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Michael Yaffe, PhD VP of Research

VP of TAP



Erik Nelson, PhD Exec. Dir. Research





Orsi Giricz, PhD Exec. Dir. Research Sr. Dir. Res & Comms



Lore Gruenbaum, PhD Jun Xu, PhD Exec. Dir. TAP Lead



Blaine Robinson, PhD Javeed Froozan, MBA Exec. Dir. TAP VP of BD & Alliance



